

### Application for Certification as an Eligible Energy Resource Under the Delaware Renewable Energy Portfolio Standard

1.	Name of Facility  Amy Romagno 1	
2.	Facility Address  18 N. Lotus Circle  Bear DE 19701	
	Is the facility located within the PJM control area?  If No, does the Facility have import capabilities¹?  If Yes	□ No
3.	Name of Owner Amy Romagnoli	
	Mailing Address  18 N. Lofus Circle  Bear DE 19701	
	Phone (308) 312-1350 Fax	
	Email promagnol, 999 9 gmail. com	
4.	Name of Operator	
	Mailing Address	
	PhoneFax	
	Email	

<sup>&</sup>lt;sup>1</sup> Documentation will be required to substantiate import capabilities into PJM

5.	Name of Contact Person Romagnoli
	Mailing Address
	18 N. Lotus Circle
	Canada
	Phone (30a) 312-1350 Fax
	Email promagno/1999@ gmail. Lem
6.	Name of REC/SREC Owner
	Mailing Address
	lad ball'
	PhoneFax
	Email
	Linan
7.	List all PJM-EIS GATS State Certification Numbers assigned to this facility:
	- None
8.	Operational Characteristics:
	Fuel Types Used (check all that apply):
	lacksquare Gas combustion from the anaerobic digestion of organic material
	☐ Geothermal
	☐ Ocean, wave or tidal actions, currents, or thermal differences
	☐ Qualified Biomass <sup>i</sup>
	☐ Qualified Fuel Cells <sup>ii</sup>
	☐ Qualified Hydroelectric <sup>iii</sup>
	☐ Qualified Methane Gas captured from a landfill gas recovery system <sup>iv</sup>

1	Solar
	□ Wind
	If co-firing, provide the formula on file with PJM Environmental Information
	Services, Inc. (PJM-EIS)
	Rated Capacity (in megawatts - DC)
	If multiple fuel types are utilized, attach the formula for computing the portion of output per fuel type by megawatts per hour generated.
	Facility Final Approved Interconnection Date 1/25/17
	If co-firing with fossil fuels, co-fire start date
	If co-firing with fossil fuels, attach the allocation formula on file with PJM.
9.	Is the Applicant's facility customer-sited generation*?  Yes
	Is the Applicant's facility a community owned generating facility <sup>vi</sup> ?  ☐ Yes ☐ No
	Can the output from the customer-sited generation be appropriately metered?  Yes   No

10. If the Applicant's installation is solar or wind sited in Delaware, is a minimum of
50% of the cost of the renewable energy equipment, inclusive of mounting
components, manufactured in Delaware?
□ Yes* ☑ No
Advanced Solar Heating + Cooling Signature of Company Representative
S The section of the
307 N. Bridge St #216  Address  Print Name of Company Representative
Address
*If Yes, please attach the following documentation:
<ul> <li>A copy of the supplier's invoice showing Delaware manufactured equipment with this facility identified</li> </ul>
o If the supplier's invoice shows only a coded Purchase Order (PO) number, a copy of
the company's matching PO that includes the address where the materials were
used/installed, must also be supplied
o If using a master invoice, a record of the draws against the purchased quantity, on
the master invoice, must show the address of each use and the quantity of material used
11. If the Applicant's installation is solar or wind sited in Delaware:
a. Was the facility physically constructed or installed with a workforce that consists of at least 75% Delaware residents?
☐ Yes* ☐ No
b. Does the installing company employ, in total, a minimum of 75% workers who are Delaware residents?
☐ Yes* ☑ No
dvanced Sobr Heating + Cooling Willem H Andalact
Company Name of Installer of MB Signature of Company Representative
307 N. Bridge St #216 William H. Tidaback
Address Print Name of Company Representative
Address

\*If Yes, please attach supporting documentation (see pages 7-8 for details). Please note, in order to qualify for the Labor/Workforce Bonus, at least one of the options (a. or b.) must be met.

Rev. 8-11-2015

I, William H. Tidaback (print name) hereby certify under penalty of perjury that

- I have made reasonable inquiry, and the information contained in this Application is true and correct to the best of my knowledge, information and belief.
- 2. I am authorized to submit and execute this Application and to bind myself and/or my company to the representations contained herein.
- I /my company agree(s) to comply with and be subject to the jurisdiction of the Public Service Commission of the State of Delaware for any matters arising out of my submission of this Application or the granting of the Application.
- 4. In the event that any of the information contained in this Application changes pending the consideration of this Application or after the Application is granted, I/my company will amend the Application to provide the Commission with such changed information.
- 5. I acknowledge that if any of the representations made in this Application or in any amendment thereto are found to be untrue when made, I/the company may be subject to sanctions, including but not limited to monetary fines and/or the revocation of any Certificate granted as a result of the representations made in this Application.

Signature: Allthon H-Antal	act>
Date:	

### Required Documentation:

If the facility is customer-sited generation, attach a copy of the utility's Final Approved Interconnection Agreement

 One copy of U.S. Department of Energy, Energy Information Administration Form EIA-860, if rated capacity is >1.0 MW

- Increased production of landfill gas from production facilities in operation prior to January 1, 2004 demonstrates a net reduction in total air emissions compared to flaring and leakage;
- 2. Increased utilization of landfill gas at electric generating facilities in operation prior to January 1, 2004 (i) is used to offset the consumption of coal, oil, or natural gas at those facilities, (ii) does not result in a reduction in the percentage of landfill gas in the facility's average annual fuel mix when calculated using fuel mix measurements for 12 out of any continuous 15 month period during which the electricity is generated, and (iii) causes no net increase in air emissions from the facility; and
- Facilities installed on or after January 1, 2004 meet or exceed 2004 Federal and State air emission standards, or the Federal and State air emission standards in place on the day the facilities are first put into operation, whichever is higher.

<sup>&</sup>lt;sup>1</sup> "Qualified Biomass" means electricity generated from the combustion of biomass that has been cultivated in a sustainable manner as determined by Delaware Department of Natural Resources and Environmental Control (DNREC), and is not combusted to produce energy in a waste to energy facility or in an incinerator.

<sup>&</sup>quot;" "Qualified Fuel Cells" means electricity generated by a fuel cell powered by Renewable Fuels, as that term is defined in Section 1.0 of the Rules and Procedures to Implement the Renewable Energy Portfolio Standard, Delaware Public Service Commission Regulation Docket No. 56.

<sup>&</sup>quot;Qualified Hydroelectric" means electricity generated by a hydroelectric facility that has a maximum design capacity of 30 megawatts or less from all generating units combined that meet appropriate environmental standards as determined by DNREC.

<sup>&</sup>lt;sup>™</sup> "Qualified Methane Gas" means electricity generated by the combustion of methane gas captured from a landfill gas recovery system; provided, however, that:

<sup>&</sup>quot;Customer-sited Generation" means a generating unit that is interconnected on the end use customer's side of the retail electricity meter in such a manner that it displaces all or part of the metered consumption of the end-use customer.

vi "Community-owned Energy Generating Facility" means a renewable energy generating facility that has multiple owners or customers who share the output of the generator, which may be located either as a stand-alone facility or behind the meter of a participating owner or customer. The facility shall be interconnected to the distribution system and operated in parallel with an electric distribution company's transmission and distribution facilities.

# **Documentation Required for Delaware Labor/Workforce Bonus**

- 11. If the Applicant's installation is solar or wind sited in Delaware:
  - a. Was the facility physically constructed or installed with a workforce that consists of at least 75% Delaware residents?

If you answered yes to "a." above, complete the following as evidence.

The following individuals (list every employee) were employed by

Installation Company Name

as direct labor (physical construction and installation) for this facility: (Attach additional sheets if necessary)

Please complete the following information for all individuals listed above:

Name	Home Address City, State only (As per Tax Withholding)	Social Security Number (Last 2 digits only)
		<u>/</u>

Total Delaware Resident Employees:	
	Total Number of Employees:
0/ of Dolour B	a. a. a. a. projecto.
% of Delaware Residents (Delaware Residents Divided by To	
To replace to plained by 10	rtal Employees):

# **Documentation Required for Delaware Labor/Workforce Bonus**

<ol><li>If the Applicant's installation</li></ol>	is	solar	or	wind	sited	in	Delaware:
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b.	oes the installing company employ, in total, a minimum of 75% of workers who ar	
	elaware residents? No	C

If you answered yes to "b." above, complete the following as evidence:

Installation	Company	Name

employed the following individuals (list EVERY employee on the payroll during the period from project start date until project completion date). Projects are considered complete upon final interconnection approval to operate. (Attach additional sheets if necessary)

Project Start Date: \_\_\_\_\_ Project Complete Date:

Employee Full Name	Home Address City, State Only (As per Tax Withholding)	Social Security Number (Last 2 digits Only)
	M	

Total Delaware Resident Employees:	Total Number of Employees:	
% of Delaware Residents (Delaware Residents Divided by Tot		-



#### **DELAWARE INTERCONNECTION APPLICATION & AGREEMENT**

With Terms and Conditions for Interconnection (Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW) (Final Agreement - must be completed after installation and prior to interconnection)

### Certificate of Completion<sup>11</sup>

#### INTERCONNECTION CUSTOMER CONTACT INFORMATION

Customer Name:	ailing Address: Amy Romagnoli  18 N. Lotus CIR				
City: Bear		State: DE	Zip Code:		
Telephone (Daytime): (302) 312-1350		(Evening): (302) 312-13	50		
Fax Number:		E-Mail Address: promagnoli999@gmail.com			
FACILITY INFOR					
Facility Address: _	18 N. Lotus CIR				
City: BEAR		State: DE Z	Zip Code: 19701		
DPL Account #: 55006976355					
	Solar PV Prime Mover: Photovoltaics		ver: Photovoltaics		
Inverter Type: Forced Commutated Line Commutated					
Number of Inverte	ers: 1				
Inverter Manufact	turer: Solaredge	Model Number	r(s) of Inverter: SE 7600A- US		
Rating	DC Generator Total <sup>12</sup> Nameplate Rating:6.09 (kW), AC Inverter Total <sup>13</sup> Rating7.6 (kW), AC System Design Total Capacity <sup>14</sup> :7.6 (kW) (kVA)				
Generator (or PV	Panel) Manufacturer, Mo	odel # <sup>15</sup> : Hyundai S280RG			

Information entered here on Certificate of Completion (Part 2) must match part 1 Sum of all generators or PV Panels
Sum of all inverters

This will be your system design capacity based upon your unique system variables.
 If more than one type, please list all manufactures and model numbers.

<b>EQUIPMENT INSTALLATION CONTRAC</b>	TOR Owner (Customer) Installed: Yes No			
Contractor Name: Advanced Solar Heating and Coo				
Mailing Address: 307 N Bridge ST				
City: Elkton	State: MD Zip Code: 21921			
Telephone (Daytime): (302) 731-1000				
	E-Mail Address: butchtidaback@gmail.com			
	ERCONNECTION CUSTOMER SIGNATURE			
attached. The Interconnection Customer ac Generator Facility until receipt of the final a below.  Signed:  (Signature of interconnection)	nd has been approved by the local electric inspector ectric inspector's form indicating final approval is cknowledges that it shall not operate the Small acceptance and approval by the EDC as provided  Date 42.7/17			
Check if copy of signed electric inspection form is attached				
ACCEPTANCE AND FINAL APPROVAL I	FOR INTERCONNECTION (for EDC use only)			
The interconnection agreement is approved	d and the Small Generator Facility is approved for and return of this Certificate of Completion by EDC:			
TDC Circulation of V · A ci lakeish	ess Test? (Initial) Yes (LH No () est: Passed: (Initial) () lly signed by na.harris2@exeloncorp.com l=lakeisha.harris2@exeloncorp.com Date: 07/25/2017			
Printed Name: Lakeisha Harris	7017.07.25 13:39:10 -04'00' Title: Acct Rep			
miled Name.	IIIle: 11001 TOP			